

November 1, 2002

EPCRA Reporting Center P.O. Box 3348 Merrifield, VA 22116-3348

Patricia Williams MDE/TARSA Community Right-to-Know 2500 Broening Highway Baltimore, MD 21224 Craig E. Yussen
Toxics Programs and Enforcement
Branch (3WC33)
United States Environmental
Protection Agency
1650 Arch Street
Philadelphia, PA 19103-2029

Re: TRI Revision Request

Dear Mr. Yussen, Ms. Williams, and EPCRA Reporting Center:

U.S. EPA issued a Notice of Noncompliance to Baltimore Quality Assurance (BQA) on September 30, 2002, which BQA received on October 3, 2002. That Notice of Noncompliance instructed BQA to submit to U.S. EPA and the State of Maryland a toxic chemical release Form R for ethylene glycol for calendar years 1998, 1999, and 2000. The Notice of Noncompliance was based on an inspection conducted on February 5, 2002.

BQA has enclosed herewith a toxic chemical release Form R for ethylene glycol for calendar years 1998, 1999, and 2000. In reviewing its records, BQA determined that it filed Forms A for ethylene glycol and ethylene oxide for calendar year 2001 when it should have filed Forms R. BQA filed these Forms A in July, 2002, which was after the February 5 inspection but before BQA received the Notice of Noncompliance that was issued on September 30. Because of this timing issue, U.S. EPA's inspector could not have been aware of this issue, but because it has determined that it should have filed Forms R for 2001, BQA also has enclosed herewith Forms R for ethylene glycol and ethylene oxide for calendar year 2001.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Ellen Heath

Steath

cc:

Aquanetta L. Dickens, Chief Toxics Programs & Enforcement Branch

David Howe



F-forcement Bran

Toxics Enforcement Branch



#### FORM R

#### TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

**United States Environmental Protection** 

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHEF	RE TO SEND COM	PLETED	FORMS		EPCRA Rep P.O Box 334		g Center	2				TATE OF			Enter "X" is a revision		is	Х
				ľ	Merrifield, V	A 22	116-3348		,				,	F	or EPA use	only	7	
					ATTN: TOX	IC C	HEMICAL	RELE	ASE	INVENT	ORY	·						
lmp	ortant: See i	nstruct	ions	to de	termine	wh	en "No	ot Ap	opli	cable	(NA)	" boxe	s sh	ould	be che	cked.		
			P/	ART	. FACI	LIT	Y IDE	NTIF	FIC	ATIO	INI V	FORM	ATIC	NC				
SEC	TION 1. REPO	ORTING	YEA	R 199	8													
SEC	TION 2. TRAD	E SEC	RET I	NFOR	MATION	I												
2.1	Are you claiming the Yes (Answer		2.2;	ſ	X No (I	Do no	secret? ot answer Section 3)		2	2.2	his cop	only if "YES	S" in 2	Sanit	ized	Un	sanitiz	zed
SEC	TION 3. CERT	TIFICAT	ION	(lmpc	ortant: R	eac	and si	ign a	fter	comp	leting	all fon	m se	ctio	ns.)			
inform	by certify that I have action is true and co data available to the	mplete and	d that th	ne amoui					-	_								
Name	and official title of o	wner/ope	ator or	senior m	nanagement	offic	ial:					Signature	e:				Date	e Signe
ELLEN					GENERAL MAI	NAGE	R					- El	Us	ر مر	Mut	t	11/01	1/2002
SEC	TION 4. FACI	LITY ID	ENTI	FICAT	ION										<del> </del>			
4.1								TRI	Facili	ty ID Nur	nber	21224BLT	MR420	0B				
Facility	or Establishment Na	me						Facili	ity or I	Establishn	nent Na	me or Maili	ng Add	ress(if	different from	street ad	ldress)	
BALTIM	ORE QUALITY ASSURA	NCE			_			NA										
Street								Mailir	ng Ad	dress								
4200 BG	OSTON ST.																	
City/Co	ounty/State/Zip Code							City/S	State/	Zip Code		]					Countr	y (Non-l
BALTIM	IORE	BALTI	MORE CI	TY		MD	21224-											
4.2	This report contain (Important : check				plicable)	a.		An entifacility	ire	b	Par faci	rt of a ility	c.		A Federal facility	d. [		GOCO
4.2	Technical Contact	Nome		DAVID	HOME									Tele	phone Numbe	r (include	area c	ode)
4.3	rechnical Contact	. Name		DAVID	HOAAE									(401)	423-2003			
4.4	Public Contact Na	me		FLIEN	HEATH									<del> </del>	phone Numbe	r (include	area c	(eboc
7.4	T dbill Corract No			LLLLIN										(410)	327-0916			
4.5	SIC Code (s) (4 d	igits)	-		rimary 2099	⊢.	h			•		d.			e.	i	f.	
a. 2099 b. c. d. e.  Degrees Minutes Seconds Degrees Minutes									98		econds							
								Longit	ude		076		33	-		24		
4.7	Dun & Bradstreet Number(s) (9 digit		4.8		entification N		er	4.9		cility NPD			4.10		derground li IC) I.D. Num			
. N		(3)	a. N	·	1.D. 140.) (12	- 0110	nacters)	a.	NA	inber(e) (	O OHAI	201010)	a.	NA NA	107 1.0. 11411			
).	<u> </u>		b.					b.					b.					
SEC	TION 5. PARE	NT CO	MPAN	NY INF	ORMAT	ION												
5.1	Name of Parent C			NA		_	OSMED	GROL	JP									
5.2	Parent Company's	Dun & B	radstree	et Numb	er	N/	A X										-	

2001 version 6.02.00

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name
ETHYLENE GLYCOL

	Why have the																	
SEC	TION 1.	TOXIC	CHEM	IICAL	IDEN	TITY		(lm	portant:	DO NO	Γ comple	te this	section i	f you co	mpleted \$	Section 2	2 below.	)
1.1	CAS Numb	er (Impor	tant: Ent	er only o	ne nun	nber exa	ctly a	s it app	ears on t	he Section	n 313 list	t. Enter	category	code if re	porting a	chemical	category	.)
	107211	,																<del></del>
1.2	Toxic Cher	nical or Ch	hemical (	Category	Name	(Import	ant: E	nter on	ly one na	me exact	ly as it ap	pears o	n the Sec	tion 313	list.)			
1.4	ETHYLE	NE GLYC	OL															
1.3	Generic Ch	nemical Na	ame (Imp	oortant; (	Comple	te only i	f Part	1, Sec	tion 2.1 is	s checked	l "yes". (	Seneric	Name m	st be str	ucturally d	lescriptive	e.)	
	NA		,															
1.4	Distribut													0.04	- 1 400 D		اداد د حاد	
	(If there are be reported	•			-	•									na 100. D	ISTIDUTIO	n snoula	
	1	2	3	4	5	6	;	7	8	9	10	11	12	13	14	15	16	17
NA															T			
SEC	ΓΙΟΝ 2.	MIXTU	RE CO	MPO	VENT	IDEN	TIT	Y (lm	portant:	DO NO	r comple	te this	section i	f you co	mpleted	Section '	1 above.	.)
	Generic C	hemical N	ame Pro	vided by	Suppl	ier (Imp	ortant	: Maxim	um of 70	characte	ers, includ	ding nur	nbers, let	ters, spac	es, and p	unctuatio	on.)	
2.1						<u></u>		<del></del>										
	NA												· · · · · · · · · · · · · · · · · · ·		···		····	<del></del>
SECT	TION 3.	ACTIVI (Importan					łE T	OXIC	CHEN	IICAL	AT THI	E FAC	ILITY					
3.1	Manufa	cture th	ne toxi	c chen	nical:	3.	2 F	roces	s the t	oxic ch	emical:	3	.3 Ot	herwise	use th	e toxic	chemi	cal:
a.	X Pro	duce	b.	Impo	rt													
	If p	roduce or	import:			a	. [	As	a reactar	nt		1	a. 🔝	As a ch	emical pro	ocessing	aid	
c.	Foi	on-site us	se/proce	ssing		b	. 「	As	a formula	ation com	ponent	-	b. 🗍	As a ma	ınufacturi	ng aid		
d.	Foi	sale/distr	ribution			c	. 🗂	Asa	an article	compone	ent		c. 🗍	Ancillary	or other	use		
e.	X As	a byprodu	ıct			d		Rep	ackaging	1		-	لـــا					
f.	<del></del>	an impurit				l e	, <del> </del>	┥ `	an impuri			i						
	TION 4.			MOUN	T OF						SITE A	TAN	Y TIME	DURI	NG THE	CALE	NDAR	YEA
		-							<del></del>									
4.1	04	(	Enter t	lwo-dig	git cod	le fror	n ins	structi	on pac	kage.)								
SEC	TION 5.	QUANT	TITY O	F THE	TO	(IC CI	IEM	ICAL	ENTE	RING E	ACH E	NVIR	ONME	NTAL I	MEDIUM	M ONS	ITE	<del></del>
							1			(pounds			sis of Es ter code)		C. % F	rom Sto	rmwater	
5.1	Fugitive o		t		NA	Х		N.	Α				, <u>.</u>					
5.2	Stack or p air emissi				NA	Х		N	A									
5.3	Discharge water bod	es to receivies (enter	ving stre	ams or ne per bo	)X)													
	Stream	or Wate	er Bod	y Nam	е								<del></del>					
5.3.1	NA						_		<del></del>									
5.3.2							_											
5.3.3	L		,			<del>,</del>											., · . · · · · · · · · · · · · · · · · ·	
If addit	ional page	s of Part	ii, Secti	on 5.3 a	re atta	ched, iı	ndica	te the t	otal nun	nber of p	ages in t	this bo	ξ	1				

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name
ETHYLENE GLYCOL

and indicate the Part II, Section 5.3 page number in this box.

(example: 1,2,3, etc.)

# EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name

				4 4	,						ETHYL			.d.,31		
SECT	TION 5. QUA	ANTITY O	F THE 1	NA					/year*) (e	enter range	B. Basis of (enter of	of Est		JM ONS	SITE(Con	tinue
5.4.1	Undergrou to Class I \	nd Injection o	onsite	х	NA	۱										
5.4.2	Undergrou to Class II-	nd Injection o	onsite	х	NA	`								· · · · · · · · · · · · · · · · · · ·		
5.5	Disposal to	land onsite														
5.5.1	A RCRA Sub	otitle C landfil	ls	X	NA											
5.5.1	B Other land	fills		х	NA											
5.5.2	Land treatr farming	nent/applicati	ion	х	NA	\										
5.5.3	Surface Im	poundment		X	NA				·							
5.5.4	Other disp	osal		х	NA											
SEC	TION 6. TR	ANSFERS	OF TH	E TO	(IC (	CHEM	IICAL	IN WA	STES	TO OFF	SITE LO	CAT	IONS			
6.1 D	ISCHARGE	S TO PU	BLICLY	OWN	ED 1	ΓREA	TMEN	OW T	RKS (F	OTWs)	***************************************					
6.1.A	Total Quant	ity Transfe	erred to F	POTW	s and	i Basi	s of E	stimate								
6.1.A	.1. Total Tra enter rang	<b>nsfers</b> (pou ge code** o	-	-				6.1.		sis of Est er code)	imate					
	NA															
6.1.B	.1	POTW Name	NA								-					
POTW	/ Address															
City					-		State		County					z	ip -	
6.1.B.	2	POTW Name									-					
POTW	/ Address															
City			<u> </u>				State		County					z	ip	
If addi	tional pages o	of Part II, Sec			_				•		example: 1,2	.3. et	c.)			
	FION 6.2 TE									<u> </u>			,	<del></del>		
6.2.1		PA Identifi							NA.				<del></del> .			
	e Location Nam		MERICAN (		<u> </u>											
	e Address	I	RENGO A					<del></del>	SUN	E 103		· · · · · · · · · · · · · · · · · · ·			<del></del>	
City	PASADENA	l		State	CA	Coun	ity LC	OS ANGE	LES			Zip	91101-		Country (Non-US)	T

	TRI F	acility ID Numb	er		
EPA FORM R	21224	BLTMR4200B			
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)	Toxic	Chemical, Cate	gory or G	ene	eric Name
	ETHYLE	ENE GLYCOL			
Is location under control of reporting facility or parent company?		Yes	)		No

#### PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

	TRI Facility ID Number
	21224BLTMR4200B
	Toxic Chemical, Category or Generic Name
г	

							EIF	ITLENE GLYCOL							
SECTION 6.	.2 TRANS	FERS TO O	THER OF	F-SI	TE LOCATIO	ONS (Continue	d)		And the state of t						
A. Total Transf (enter range	ers (pound code** or esti	is/year*) mate)	B. Ba			pe of Waste Trea cycling/Energy F	-1								
<b>1.</b> 124420			1. C				1. MS	)3							
2. NA			2.				2.								
3.			3.				3.								
4.		,	4.				4.								
6.2. <u>2</u> Off-	Site EPA Id	lentification N	lumber (RC	RA II	D No.)										
Off-Site location	Name														
Off-Site Address	5														
City			State	Col	unty			Zip	Country (Non-US)						
Is location u	nder contro	ol of reportin	g facility o	r par	rent company	/?	T	Yes	No						
A. Total Tra (enter ra	ansfers (pange code** o	ounds/year*) r estimate)		E	3. Basis of Estin (enter code)	mate	,		eatment/Disposal/ Recovery (enter code)						
1.			1.		.,		1.								
2.	******		2.				2.								
3.			3.				3.								
4.			4.				4.								
SECTION 7/	A. ON-SIT	E WASTE	TREATME	NT I	METHODS A	ND EFFICIENCY	•								
X Not A	pplicable (NA	) <b>-</b>			e treatment is app	plied to any chemical category.									
a. General Waste Stream (enter code)		Vaste Treatmer enter 3-characte	nt Method(s) S			c. Range of Influent Concentration	E	Vaste Treatment Efficiency Estimate	e. Based on Operating Data ?						
7A.1a	7A. 1b	1		2		7A. 1c		7A. 1d	7A. 1e						
NA	3 6	4 7		5 8				%	Yes No						
7A.2a	7A. 2b	1		2		7A. 2c	_	7A. 2d	7A.2e						
771111	3 6	4 7		5 8				%	Yes No						
7A.3a	7A.3b	1		2		7A.3c	_	7A. 3d	7A. 3e						
	3	4		5					Yes No						
	6	7		8			1.	%							
7A.4a	7A.4b	1		2		7A.4c		7A. 4d	7A.4e						
	3	4 7		5 8				%	Yes No						
7A.5a	7A. 5b	1		2		7A.5c	-	7A, 5d	7A.5e						
, ruou	3	4		5				%	Yes No						
If additional page and indicate the I						umber of pages in thi (example: 1,2,3, etc)		1							

<sup>\*</sup> For Dioxin or Dioxin-like compounds, report in grams/

<sup>\*\*</sup> Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 poun

# EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

	1 RI Facility ID Number
ור	21224BLTMR4200B
٠,	Toxic Chemical, Category or Generic Name
	CTI NA ENE OL VOOL

					ETHYLENE GLYCOL	L						
SEC1	TON 7B. ON-SITE ENERGY R	ECOVERY PROCE	ESSES									
x	NOLADDIICADIE (INA) -	re if no on-site energy rec ntaining the toxic chemica		- 1								
E	nergy Recovery Methods [enter 3-charac	er code(s)]			<del>* , , , , </del>							
1 NA	2		3		4							
SECT	TON 7C. ON-SITE RECYCLING	G PROCESSES	<del> ,</del>	<del></del>	· · · · · · · · · · · · · · · · · · ·							
х	Not Applicable (NA) - Check here if	no on-site recycling is ap ining the toxic chemical o										
 R	ecycling Methods [enter 3-character code		or Chemical Ca	tegory.	· · · · · · · · · · · · · · · · · · ·		<del> </del>					
1. N		3.	·	<b>-</b> 4.		] 6	5.					
						.i 1						
6. 7. 8. 9. 10.												
SECT	ION 8. SOURCE REDUCTION	AND RECYCLING	ACTIVIT	IES			,					
		Column A Prior Year (pounds/year*)	Current	olumn B Reporting Year unds/year²)	Column C Following Yea (pounds/year*	Į.	Column D Second Following Year (pounds/year*)					
8.1	Quantity released ***	NA		NA		NA	NA					
8.2	Quantity used for energy recovery onsite	NA		NA		NA	NA					
8.3	Quantity used for energy recovery offsite	NA		NA		NA	NA					
8.4	Quantity recycled onsite	NA		NA		NA	NA					
8.5	Quantity recycled offsite	133135		124420	108	252	105294					
8.6	Quantity treated onsite	NA		NA		NA	NA					
8.7	Quantity treated offsite	NA		NA		NA	NA					
8.8	Quantity released to the environment as catastrophic events, or one-time events processes (pounds/year)				0							
8.9	Production ratio or activity index				0000000.91							
8.10	Did your facility engage in any source re enter "NA" in Section 8.10.1 and answe		chemical duni	ng the reporting y	ear? If not,							
	Source Reduction Activities Methods to Identify Activity (enter codes)  [enter code(s)]											
8.10.1	NA	a.	<del></del>	b.		c.	c.					
8.10.2		a.		b.	· -	c.						
8.10.3		a.		b.	·	c.						
8.10.4		a.		b.		c.						
8.11	Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one box)  YES NO X											

EPA Form 9350-1 (Rev. 01/2001) - Previous editions are obsolete.

<sup>\*</sup> For Dioxin or Dioxin-like compounds, report in grams/yea

<sup>\*\*\*\*</sup>Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping or disposing into the environment." Do not include any quantity treated onsite.



#### FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

**United States Environmental Protection** Agency

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHE	RE TO SEND COM	P.O Box 33	48	_		2.		OPRIATE structions					Enter "X" is a revisi		is x		
				Merrifield, V ATTN: TOX				RELE	ASE IN	VENTOR	Y			F	or EPA use	only	
Imp	ortant: See ir	nstruction	ns to de	termine	wh	en "l	Vol	t Ap	plica	ble (NA	\)" I	ooxe	s sh	ould	be che	cked.	
	,		PART	i. FACI	LIT	Y IDI	ΕN	TIF	ICAT	ION I	NFC	)RM/	ATIC	ON			
SEC	TION 1. REPO	RTING YE	AR 199	9													
SEC	TION 2. TRAD	E SECRE	T INFOR	MATION	1												
2.1		e toxic chemic r question 2.2 substantiation	;	X No (	Do no	secret? ot answe Section	er 2.	2;	2.2	Is this c		if "YES	5" in 2	Saniti	ized	Ur	sanitized
SEC	TION 3. CERT	IFICATION	N (Impo	ortant: F	₹ead	and	sig	n af	ter co	mpleti	ng a	ll fon	m se	ctio	ns.)		
inform	by certify that I have nation is true and cor data available to the	mplete and tha	at the amou														· · · · · · · · · · · · · · · · · · ·
Name	and official title of o			Signature:				:	<del></del>	/		Date Sign					
ELLEN	R 						Cu	'se'	<b>U</b>	luth	· · · · ·	11/01/2002					
SECTION 4. FACILITY IDENTIFICATION																	
4.1		<del></del>		<del> </del>			-			D Number		224BLTI					<del> </del>
	or Establishment Nar						┢		y or Esta	blishment	Name	or Maili	ng Add	ress(if	different from	n street a	Idress)
	IORE QUALITY ASSURA	NCE					-	NA									
Street 4200 B	OSTON ST.						-	Mailin	g Addres	<u>ss</u> ]							
City/C	ounty/State/Zip Code	]					1	City/SI	ate/Zip	Code							Country (Non
BALTIN	IORE	BALTIMORE	E CITY		MD	21224-								-			<del></del>
4.2	This report contain (Important : check			plicable)	a.	х	Ł	n entir cility	e b.		Part o		c.		A Federal facility	d. [	GOC
4.3	Technical Contact	Name	DAVID	HOWE		,.								<del></del>	ohone Numb	er (include	area code)
7.0									<del></del> .	·		. <del></del>		<del>  `</del>	423-2003	an Grahude	
4.4	Public Contact Na	ıme	ELLEN	HEATH											327-0916	a (modu	alea code,
4.5	SIC Code (s) (4 di	inits)	Р	rimary	T				T					<u> </u>	[		
7.0			<del></del>	2099	!	b.			C.	<del></del>		d			е.		f.
4.6 Latitude Degrees Minutes 39 17							cond 15	s	-} ,	Longitude	ŀ		egrees 076		Minu 33	<del></del>	Second 24
4.7 Dun & Bradstreet Number(s) (9 digits)  4.8 EPA Identification Number (RCRA I.D. No.) (12 character)						er	A 9 Facility NPDES Permit 4 10					Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)					
a. N	····	a.	NA NA				-	a. N	IA.				a.	NA			
b.		b.					Ţ	b.					b.			***************************************	
	TION 5. PARE	***************************************	ANY INI	FORMAT	1				·	<del></del>						<del> </del>	
5.1	Name of Parent C		NA		┼	OSME		ROU	P 	<del></del>		<del></del> .			····		
5.2 Parent Company's Dun & Bradstreet Number NA X																	

TRI Facility ID Number
21224BLTMR4200B

Toxic Chemical, Category or Generic Name
ETHYLENE GLYCOL

				*							
SEC	TION 1. TOXIC CHEM	MICAL IDENTITY	(Importa	nt: DO NOT com	plete this s	ection if	you com	pleted S	ection 2	below.)	
1.1	CAS Number (Important: Ent	ter only one number e	xactly as it appears o	n the Section 313	list. Enter ca	ategory c	ode if rep	orting a c	hemical	category.	)
1.2	Toxic Chemical or Chemical ETHYLENE GLYCOL	Category Name (Impo	ortant: Enter only one	name exactly as i	t appears on	the Sect	ion 313 lis	st.)			
1.3	Generic Chemical Name (Im	portant: Complete only	y if Part 1, Section 2.	1 is checked "yes	'. Generic N	lame mu	st be struc	cturally de	escriptive	-)	
1.4	Distribution of Each M	ember of the Dio	vin and Diovin-li	ke Compound	e Categor	· · · · · · · · · · · · · · · · · · ·	<del></del>				
	(If there are any numbers in I	boxes 1-17, then ever	y field must be filled i	n with either 0 or :	some numbe	r betwee		d 100. Di	stribution	should	
	be reported in percentages a	nd the total should eq	ual 100%. If you do r 6 7 8	ot have speciation 9 10		ole, indica 12	ate NA.) 13	14	15	16	17
NA >	<del></del>		<del>`                                    </del>	<del>ŢŢŢ</del>	T	<u></u>		<del></del> _			<del>''</del>
	TION 2. MIXTURE CO	MPONENT IDE	NTITY (Importa-	et: DO NOT com	nioto thic s	oction if	MOD COM	nicted S	ortion 1	abovo l	
	1 1. 1 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del>	<del></del>						
2.1	Generic Chemical Name Pro	ovided by Supplier (im	portant: Maximum or	/U characters, in	auaing num	Ders, lette	ers, space	s, and p	unctuatio	n.)	
	NA										
SECT	TION 3. ACTIVITIES (Important: Chec		THE TOXIC CH	EMICAL AT 1	HE FACI	LITY					
3.1	Manufacture the toxi	c chemical: 3	3.2 Process the	toxic chemic	al: 3.	3 Oth	erwise	use the	toxic (	chemic	al:
a.	X Produce b.	Import		· · · · · · · · · · · · · · · · · · ·				<del></del>			
	if produce or import:		a. As a read	tant	a		As a cher	nical pro	cessing a	nid	
c.	For on-site use/proce	essing	b. As a form	nulation componer	t b	. □	As a man	ufacturin	g aid		
d.	For sale/distribution		c. As an arti	cle component	c	. 🔲	Ancillary	or other u	ise		
e.	X As a byproduct		d. Repackag	ing	ļ						
f.	As an impurity		e. As an imp	urity							
SEC	TION 4. MAXIMUM A	MOUNT OF THE	TOXIC CHEM	CAL ONSITE	AT ANY	TIME	DURIN	G THE	CALE	NDAR	YEA
4.1	04 (Enter	two-digit code fro	om instruction na	ackage )							
	<u> </u>	<del></del>	<del> </del>		LENVIRO	NIBAEN	TAL M	EDILIA	ONE	TE	
SEC	TION 5. QUANTITY C	F THE TOXIC C		<del> </del>				<del>,</del>			
	<del></del>		i i	e (pounds/year*) ode or estimate**)	1	er code)	e	C. % Fi	om Stor	mwater	
5.1	Fugitive or non-point air emissions	NA X	NA NA		<u>_</u>	_					
5.2	Stack or point air emissions	NA X	] NA								
5.3	Discharges to receiving stre water bodies (enter one nam										
	Stream or Water Bod	y Name									
5,3,1	NA										
5.3.2											
5.3.3											
If addit	ional pages of Part II. Secti	on 5.3 are attached.	indicate the total n	umber of pages	in this box		1				

\* For Dioxin or Dioxin-like compounds, report in grams

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name
ETHYLENE GLYCOL

and indicate the Part II, Section 5.3 page number in this box.

(example: 1,2,3, etc.)

# EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name

SECTIO	N 5. QU/	ANTITY O	F THE 1	OXIC	CHEMIC	CAL EN	ITERIN	IG EACI	ł ENVII	RONMEN	ITAL M	EDIUM	ONSIT	E(Continu
				NA	A. Total F	Release		/year*) (entr r estimate)	er range	B. Basis (enter		te	·	
5.4.1	Undergroun to Class I V	nd Injection o Vells	nsite	х	NA								<del> </del>	
5.4.2	Undergrour to Class II-	nd Injection o V Wells	nsite	х	NA			··· · · · · · · · · · · · · · · · · ·	" * . ",.			<u></u>		
5.5	Disposal to	land onsite			l.									
5.5.1A	RCRA Sub	title C landfill	s	х	NA									
5.5.1B	Other landf	ills		х	NA									
5.5.2	Land treatn farming	nent/application	on	х	NA									
5.5.3	Surface Im	poundment		х	NA									
5.5.4	Other dispo	sal		Х	NA									
SECTIO	ON 6. TRA	NSFERS	OF TH	E TO	(IC CHE	VICAL	IN WA	STES TO	O OFF-	SITE LO	CATION	us		
6.1 DIS	CHARGE	S TO PU	BLICLY	OWN	ED TREA	ATMEN	T WO	RKS (PO	TWs)					
6.1.A To	tal Quant	ity Transfe	erred to F	WTO	s and Bas	is of E	stimate							
		nsfers (pou	-	-			6.1.	A.2 Basis	of Esti	mate				
	(enter rang	je code** o	r estimate	e)				(enter	code)		<del>,</del>			
	NA				<del></del>				·					
6.1.B.1	Į	POTW Name	NA											
POTW A	ddress				<del></del>				<del></del>				··········	
City						State		County					Zip	-
6.1.B.2		POTW Name				L	1	<u> </u>	L	<del> </del>		<del></del>		
POTW A	ddress				<del></del>			···	J.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			·		
City	<del> </del>		<u> </u>		<del> </del>	State		County				<del></del>	Zip	
If addition	nal pages o	f Part II, Sec	tion 6.1 ar	e attac	hed, indica	te the to	tal numi	er of page	!s					
in this bo	x 1 a	nd indicate	the Part il	, Secti	on 6.1 page	numbe	in this l	хох	1 (e	xample: 1,	2,3, etc.)			
SECTIO	ON 6.2 TR	ANSFER	S TO O	THER	OFF-SIT	E LOC	OITA	IS						
6.2. <u>1</u>	Off-Site E	PA Identifi	cation Nu	mber	(RCRA ID	No.)		NA						
Off-Site L	ocation Nam	e AM	IERICAN (	HEMIC	CAL EXCHA	NGE								
Off-Site A	ddress	159 N. MAI	RENGO A	VE				SUITE	103					
City PA	ASADENA	<del></del>	*******	State	CA Cou	nty LC	S ANGE	LES			Zip 911	101-		ountry on-US)

# EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED) Is location under control of reporting facility or parent company? TRI Facility ID Number 21224BLTMR4200B Toxic Chemical, Category or Generic Name ETHYLENE GLYCOL Yes X No

#### PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TREPacinty ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name
ETLYLENE CLYCOL

SECTION 6	.2 TRANSFER	S TO OTH	HER OFF-SI	TE LOCA	TIONS (Continue	d)	
A. Total Trans (enter range	fers (pounds/yea code** or estimate)	-	B. Basis o			1	Treatment/Disposal/ ergy Recovery (enter code)
1. 108252			1. C			1. M94	
2. NA			2.			2.	
3.			3.			3.	
4.			4.			4.	
6.2. <u>2</u> Off-	-Site EPA Identifi	cation Nun	nber (RCRA I	D No.)			
Off-Site location	Name						
Off-Site Address	5						
City		s	State Co	unty		Zip	(Non-US)
Is location u	nder control of	reporting f	facility or pa	rent comp	any?	Yes	No
A. Total Tr (enter ra	ansfers (pounds ange code** or estin			B. Basis of E		,	te Treatment/Disposal/ nergy Recovery (enter code)
1.			1.	<del></del>		1.	,
2.			2.			2.	
3.			3.			3.	
4.			4.			4.	
SECTION 7	A. ON-SITE W	ASTE TR	EATMENT	METHOD	S AND EFFICIENCY	7	
X Not A	nniicanie (NA) -		no on-site wast		applied to any  I or chemical category.		
a. General Waste Stream (enter code)	b. Waste		/lethod(s) Seque		c. Range of Influent Concentration	d. Waste Treatr Efficiency Estimate	nent e. Based on Operating Data ?
7A.1a	7A. 1b	1	2		7A. 1c	7A. 1d	7A. 1e
NA	3 6	4 7	5 8			%	Yes No
7A.2a	7A. 2b	1	2		7A.2c	7A. 2d	7A. 2e
	3 6	4 7	5 8			%	Yes No
7A.3a	7A.3b	1	2		7A.3c	7A. 3d	7A.3e
	3	] 4	5		1		Yes No
	6	7	8		<b>1</b>	%	
7A.4a	7A. 4b	1	2		7A.4c	7A. 4d	7A. 4e
	3 6	4 7	5 8			%	Yes No
7A.5a	7A.5b	1	2		7A.5c	7A, 5d	7A.5e
	3	] 4	5		1		Yes No
	6	7	8		11	%	
. •				_	I number of pages in th		
and indicate the	Part II, Section 6.2	/7A page nu	umber in this b	DX:	1 (example: 1,2,3, etc)	)	

<sup>\*</sup> For Dioxin or Dioxin-like compounds, report in grams/

<sup>\*\*</sup> Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 poun

## EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

	TRI Facility ID Number
"	21224BLTMR4200B
"	Toxic Chemical, Category or Generic Name

							,		C Chemical LENE GLYCO		ry or (	Generic Name	<del></del>	
SECT	TION 7B. ON-SITE ENERGY	'RECO	ERY PRO	CES	SES					. 80	· · ·	•		
х	NOLADDICADIE (NA) -		on-site energy the toxic che			-	vaste							
E	nergy Recovery Methods [enter 3-cha	racter code	(s)]											
1 N/	2		]	3				4						
SECT	TION 7C. ON-SITE RECYCL	NG PRO	CESSES											
х	Not Applicable (NA) - Check her stream or		ite recycling is e toxic chemic		=								- •	
R	ecycling Methods [enter 3-character c	ode(s)]	· · · · · · · · · · · · · · · · · · ·			<del></del>				<del></del>		···· · · · · · · · · · · · · · · · · ·	<del></del>	
1. N	2.		3.				4.			]	5.			
6.	7.		8.				9.			]	10.			
SECT	TION 8. SOURCE REDUCTI	ON AND	RECYCL	ING A	ACTIVITI	ES	······································		<del></del>				<del>                                      </del>	
			Column A	1	Co	lumn B	··· ·	<u> </u>	Column C			Column (	)	
	Column A Column B Column C Column D Prior Year Current Reporting Year Following Year Second Following Year (pounds/year*) (pounds/year*) (pounds/year*) (pounds/year*)													
8.1	Quantity released ***			NA		N	Α	<u> </u>		NA			NA	
8.2	Quantity used for energy recovery onsite		NA			N	Α			NA			NA	
8.3	Quantity used for energy recovery offsite			NA		N	A			NA			NA	
8.4	Quantity recycled onsite			NA	· · · · · · · · · · · · · · · · · · ·	N	A			NA			NA	
8.5	Quantity recycled offsite		124	420		10825	2		105	294		688	326	
8.6	Quantity treated onsite			NA		N	A			NA			NA	
8.7	Quantity treated offsite			NA		N	A			NA		!	NA	
8.8	Quantity released to the environment catastrophic events, or one-time ever processes (pounds/year)				on			0						
8.9	Production ratio or activity index	<del></del>			*	· · · · · · · · · · · · · · · · · · ·		000	0001.08			• • •		
8.10	Did your facility engage in any source enter "NA" in Section 8.10.1 and ans			his che	emical during	the repo	orting ye	ear? If r	not,					
0.10	Source Reduction Activities [enter code(s)]			Me	thods to Ide	ntify Activ	ity (ent	er code	es)					
8.10.1	1 NA a. b. c.													
8.10.2		a.				b.				c.				
8.10.3		a.				b.				c.				
8.10.4		a.				b.				c.				
8.11	Is additional information on source reduction, recycling, or pollution control activities  included with this report ? (Check one box)  YES  NO  X													

EPA Form 9350-1 (Rev. 01/2001) - Previous editions are obsolete.

<sup>\*</sup> For Dioxin or Dioxin-like compounds, report in grams/ye:

<sup>\*\*\*</sup> Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping or disposing into the environment." Do not include any quantity treated onsite.

Approval Expires: 01/31/2003

Page '



#### FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

United States
Environmental Protection
Agency

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

		_		يصنعي مسانات										_				
WHE	RE TO SEND COM	rting Cer						ATE OF Appendib			Enter "X" he		is ;					
						•	22116-3 CHEM		RELEA	ASE IN	VENTO	RY			F	or EPA use or	nly	
lmp	ortant: See i	nstruc	tions	s to de	etern	nine v	when	"No	ot Ap	plica	ble (N	ΙΑ)"	boxe	s sh	ould	be chec	ked.	
			P	ART	I. F.	ACIL	ITY II	DEi	NTIF	CAT	<b>FION</b>	INF	ORM	ATIO	NC			
SEC	TION 1. REPO	ORTING	YE/	AR 20	00													
SEC	TION 2. TRAD	E SEC	RET	INFO	RMA	TION											, ,	
2.1	Are you claiming the Yes (Answe Attach		n 2.2;			No (Do	ade secre not ans to Secti	wer 2		2.2		•	/ nly if "YE:	S" in 2	Saniti	zed	Ur	sanitized
SEC	TION 3. CERT	IFICAT	ION	(lmp	ortar	nt: Re	ad an	d si	gn afi	ter co	mplet	ting	all fon	m se	ctio	ns.)		
inform	by certify that I have nation is true and con data available to the	mplete an	d that t	the amo	unts an					-	_		-					
	and official title of o	wner/ope	rator o	r senior	<u>_</u>							4	Signature		<u></u>	<del> ,</del>		Date Sigr
ELLEN	HEATH				GENER	RAL MANA	AGER					士	Cu	u	<u> </u>	Guth		11/01/2002
SEC	TION 4. FACI	LITY ID	ENT	IFICA	TION	<i></i>								<u></u> .				
4.1									TRI Fa	acility I	D Numb	er :	21224BLT	MR420	0B			
Facility	y or Establishment Na	me							Facility	or Esta	blishmen	t Nan	ne or Maili	ng Add	ress(if	different from s	treet ac	ldress)
BALTIN	MORE QUALITY ASSURA	NCE							NA									
Street	]								Mailing	Addres	ss							
4200 B	OSTON ST.	<del></del>																
City/Co	ounty/State/Zip Code IORE	BALTI	MORE C	CITY		ı	MD 2122	24-	City/Sta	ate/Zip	Code				_			Country (Non
4.2	This report contain						a. X		n entire	b.	$\overline{\Box}$	Part facil	of a	с. [		A Federal facility	a. [	GOC
	(Important : check	(a or b, c	HECK C	oruna	ppiican	ne)			acmity						Tolor	hone Number	include	area code)
4.3	Technical Contact	Name		DAVID	HOWE	<b>E</b>									<del></del>	423-2003	11101000	alea code,
				·		<del>_</del>		···-							<u> </u>	hone Number (	include	area code)
4.4	Public Contact Na	me		ELLEN	N HEAT	H									(410)	327-0916		
4.5	SIC Code (s) (4 di	igits)		a.	Primary 2099		b.			c.			d.			е.		f.
A E	Latitude	Deg	rees		Minu	ıtes	8	Secon	ds	Ι.			De	egrees		Minutes		Second
4.6	Lautuue	3	9		17	,		15			.ongitude	e 		076		33		24
4.7	Dun & Bradstreet Number(s) (9 digit	s)	4.8			o.) (12 o	mber character	rs)			NPDES er(s) (9 c			4.10		derground Inje C) I.D. Numbe		
. N	Α	<u> </u>		NA			· · · · · · · · · · · · · · · · · · ·		a. N	Α					NA			
SEC	TION 5. PARE	NT CO	b. MPΔ	NY IN	FOR	MATI	) N		b.	• • • • • • • • • • • • • • • • • • • •				b.	<del></del>			
5.1	Name of Parent C			NA NA				ED (	GROUP	)		1-1	<del></del>		,	<del></del>		
5.2	Parent Company's	Dun & B	radstre		ber		NA	x	7									
	· . · · , · · · · · · · · · · · · · · ·								<del></del>						,			

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name
ETHYLENE GLYCOL

SEC	TION 1. TOXIC CHEMICAL	. IDEN	ΓΙΤΥ	(lm	portant:	DO NOT	complet	e this se	ction if	you con	pleted S	ection 2	below.)	
	CAS Number (Important: Enter only	one num	ber exac	ctly as it app	ears on th	he Section	1 313 list.	Enter ca	tegory co	de if rep	orting a c	hemical	category.)	-
1.1	107211													
1.2	Toxic Chemical or Chemical Categor	ry Name	(Importa	ant: Enter on	ly one na	me exact	y as it app	pears on	the Secti	on 313 li	st.)			
	ETHYLENE GLYCOL						<del></del>							
1.3	Generic Chemical Name (Important NA	Complet	e only if	Part 1, Sect	ion 2.1 is	checked	"yes". G	eneric Na	ame mus	t be stru	cturally de	escriptive	9.)	
1.4	Distribution of Each Membe													
	(If there are any numbers in boxes 1 be reported in percentages and the		_								d 100. Di	stribution	should	
	1 2 3 4	5	6	7	8	9	10	11	12	13	14	15	16	1
NA [														
SEC	TION 2. MIXTURE COMPO	NENT	IDEN	TITY (lm)	portant:	DO NOT	complet	e this se	ction if	you con	npleted S	ection 1	above.)	
	Generic Chemical Name Provided	by Suppli	er (Impo	rtant: Maxim	um of 70	characte	rs, includi	ing numb	ers, lette	rs, space	es, and p	unctuatio	n.)	
2.1	NA			· · · · · · · · · · · · · · · · · · ·										
SEC.	FION 3. ACTIVITIES AND	IICEC /	DE TH	IE TOYIC	CHEN	MCAL /	T THE	FACI	ITV			<del></del>		
320	(important: Check all t		<u>'.)</u>			·· ··		<del></del>	<del></del>					
3.1	Manufacture the toxic che	mical:	3.2	Proces	s the to	oxic che	emical:	3.3	Oth	erwise	use the	e toxic	chemic	al:
a.	X Produce b. Imp	ort												
	If produce or import:		a.	As:	a reactan	nt		a.	<b>=</b>		mical pro	_	aid	
C.	For on-site use/processing		b.	As As	a formula	ation com	ponent	þ.		As a mar	nufacturin	g aid		
d.	For sale/distribution		C.	Asa	an article	compone	nt	C.	L '	Ancillary	or other ı	ise		
e.	X As a byproduct		d.	Rep	ackaging	!								
f.	As an impurity		e.	Asa	ın impuril	ly				4, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	····			
SEC.	TION 4. MAXIMUM AMOU	NT OF	THE 1	LOXIC CI	HEMICA	AL ON	SITE A	T ANY	TIME	DURIN	G THE	CALE	NDAR	YE
4.1	04 (Enter two-d	igit cod	e fron	n instructi	on pacl	kage.)								
SEC.	TION 5. QUANTITY OF TH	E TOX	IC CH	EMICAL	ENTE	RING E	ACH E	NVIRO	NMEN	TAL N	EDIUN	ONS	TE	
				A. Total Re (Enter ra		(pounds/ e or estima	' ' !		s of Esti r code)	mate	C. % F	rom Sto	mwater	
5.1	Fugitive or non-point air emissions	NA [	х	N/	Α									
5.2	Stack or point air emissions	NA	х	N/	4									
5.3	Discharges to receiving streams or water bodies (enter one name per													
	Stream or Water Body Na	me												
5.3.1	NA									·				
5.3.2														
5.3.3	I											·		
If addit	ional pages of Part II, Section 5.3	are attac	hed, in	dicate the t	otal num	ber of pa	iges in th	nis box		1				

\*\* Range Codes: A= 1 - 10 pounds; B= 11- 499 pounds; C= 500 - 999 pou

(example: 1,2,3, etc.)

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name
ETHYLENE GLYCOL

and indica	ate th	e Part II.	Section 5.3	page number in	this box.	Г

# EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

21224BLTMR4200B

Toxic Chemical, Category or Generic Name

ETHYLENE GLYCOL

	enn q questione			n Prefette n	_e ar ∮∜amo	1641 C			- 4 -	900 a 344 law		- পল <u>বিশ্</u> বা	NOT THE REAL PROPERTY.	23 %	as to proper to	
SECTIO	ON 5. QUA	ANTITY O	F THE T	OXIC	CHI	EMICA	YL EN	TERIN	G EAC	I ENVI	RONMEN	TAL	MEDIU	M ONS	ITE(Co	ntinue
				NA	A. T	otal Rel		-	year*) (ento estimate)	er range	B. Basis o		imate			
5.4.1	Undergrour to Class I V	nd Injection of Vells	nsite	х	NA											
5.4.2	Undergrour to Class II-	nd Injection of V Wells	nsite	х	NA											
5.5	Disposal to	land onsite														
5.5.1A	RCRA Sub	title C landfill	s	X	NA	_										
5.5.1B	Other landf	ills		х	NA											
5.5.2	Land treatn	nent/application	on	х	NA											
5.5.3	Surface Im	poundment		х	NA											
5.5.4	Other dispo	osal		х	NA											
SECTIO	ON 6. TRA	ANSFERS	OF THE	E TO	KIC C	HEMI	CAL I	N WAS	STES TO	O OFF-	SITE LO	CAT	ONS			
6.1 DIS	CHARGE	S TO PUE	BLICLY	OWN	ED T	REAT	MEN	r wof	RKS (PO	TWs)						
6.1.A To	otal Quant	ity Transfe	rred to P	WTO	s and	l Basis	of Est	timate								
		nsfers (pou	-	-				6.1.A	.2 Basis		mate					
	(enter rang	ge code** o	r estimate	e) 					(enter	code)						
	NA													···		
6.1.B.1		POTW Name	NA													
POTW A	ddress															
City						s	State		County					z	р -	
6.1.B.2		POTW Name														
POTW A	ddress				-							_				
City						8	State		County					z	р	
		f Part II, Sec										•			<u> </u>	
in this bo		and indicate								1 (e	xample: 1,2	,3, et	C-)			
		RANSFER						A I IUN	1							
6.2. <u>1</u>	Off-Site E	PA Identific	cation Nu	mber	(RCR	A ID N	0.)		NA		·		,			
Off-Site L	ocation Nam	e AM	ERICAN C	HEMIC	CALE	XCHAN	GE				<del></del>					
Off-Site A	Address	159 N. MAF	RENGO A	VE		•			SUITE	103						
City P	ASADENA			State	CA	County	LOS	ANGE	LES			Zip	91101-		Country (Non-US)	

\*\* Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 poun

# EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED) Is location under control of reporting facility or parent company? TRI Facility ID Number 21224BLTMR4200B Toxic Chemical, Category or Generic Name ETHYLENE GLYCOL Yes X No

#### PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name
ETHYLENE GLYCOL

SECTION 6.	2 TRANSFERS	то отн	IER OFF-	SITE L	OCA	ΓΙΟ	NS (Continued	i)			A. **	
A. Total Transf		r*)	B. Basis	of Estir	nate						ment/Dispos	sal/
(enter range	code** or estimate)		(enter	code)	· · · · · · ·			Re	cycling/E	nergy Re	ecovery (e	enter code)
1. 105294			1. C					1. M	93			
2. NA	·		2.	· · · · · · · · · · · · · · · · · · ·				2.				
3.			3.					3.				
4.			4.					4.				
6.2. <u>2</u> Off-	Site EPA Identifi	cation Num	nber (RCRA	ID No	.)							
Off-Site location	Name											
Off-Site Address	5											
City		s	State	County			······································		Zîp	<u> </u>		Country Non-US)
Is location u	nder control of	reporting f	facility or p	arent	compa	any	?		Yes			No
A. Total Tra (enter ra	ansfers (pounds ange code** or estin	• '			sis of E		ate				atment/Disp Recovery	
1.			1.					1.				
2.	•		2.					2.				
3.			3.					3.				
4.			4.					4.				
SECTION 7	A. ON-SITE W	ASTE TR	EATMEN	Г МЕТ	HODS	A	ND EFFICIENCY	7				
X Not A	nnlicable (NA)		no on-site wa			• •	lied to any chemical category.					
a. General Waste Stream (enter code)	b. Waste	<del></del>	flethod(s) Seq				c. Range of influent Concentration		Waste Tre Efficiency Estimate	eatment	e. Based o Operati	on ng Data ?
7A.1a	7A. 1b	1		2		Т	7A.1c		7A. 1d		7	A. 1e
NA	3	4 7		5 8		-			9/	6	Yes	No
7A.2a	7A. 2b	1		2	·····	╁	7A, 2c		7A. 2d	. ,,	7	A. 2e
	3 6	4 7		5 8		1			%	•	Yes	No
7A.3a	7A.3b	1		2		+	7A.3c		7A, 3d		7	A. 3e
	3	] 4		5		1	**************************************	_			Yes	No
	6	7	·	8	·	1	,		9	6		
7A.4a	7A.4b	1		2		T	7A.4c	1	7A. 4d		7	A. 4e
	3	] 4		5		1					Yes	No
	6	7		8					9/	6		
7A.5a	7A. 5b	1		2			7A.5c		7A. 5d		7	A. 5e
	3	] 4		5						,	Yes	No
	6	7		8			-		%	•		
					·	_	mber of pages in thi			1		
and indicate the	Part II, Section 6.2	/7A page nu	ımber in this	box:	1 1	1	(example: 1,2,3, etc)	1				

# EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

	TRI Facility ID Number
16	21224BLTMR4200B
"	Toxic Chemical, Category or Generic Name
	ETHYLENE GLYCOL

									_	Onemica		ory or c	Scilenc	Hairie	
									ETHY	LENE GLYC	OL.				
SECT	TION 7B. ON-	SITE E	NERGY RE	COVERY PRO	CES	SSES									
x	Not Applicab	le (NA) -		if no on-site energy aining the toxic che			•								
Е	nergy Recovery Me	ethods [en	ter 3-character	code(s)]						-				• • •	
1 N/	4	2			3				4						
SEC1	TION 7C. ON-	SITE RE	CYCLING	PROCESSES											
x	Not Applicable			on-site recycling is ing the toxic chemic		•			7						
R	ecycling Methods	enter 3-ch	naracter code(s	<del></del>										· · · · · · · · · · · · · · · · · · ·	
1. N	iA	2.		3.			7	4.			7	5.	<u> </u>		
		_			一		╡				_	40			=
6.		7.		8.	L			9.			<u>.</u>	10.	L		
SECT	TION 8. SOUF	RCE RE	DUCTION A	AND RECYCL	ING .	ACTIVIT	ES							•	
***	·		<del> </del>	Column A		C	olumn B			Column C	;		C	olumn D	
				Prior Year		Current l				ollowing Ye		\$		Following	
8,1	Quantity released	***	<del> </del>	(pounds/year*)	NA	(pou	nds/year*	IA	1 0	pounds/yea	NA	<u> </u>	(bor	inds/year* N	<del></del>
8.2	Quantity used for		coverv	<del></del>	NA NA			 IA	<del> </del>		NA.	-		N	
	onsite							<u> </u>							
8.3	Quantity used for offsite	energy re	covery			1	IA			NA			N.	Α	
8,4	Quantity recycled	onoito.			NA	NA NA			NA NA			N			
8.5	Quantity recycled		····	108			1052		<del> </del>		8826			6882	
8.6	Quantity treated of			<del> </del>	NA			 IA	<del> </del>		NA			N	
8.7	Quantity treated of			ļ	NA.		<del></del>	IA	<del> </del>	·	NA NA			N	
	ļ		rironment as a	result of remedial a			· · · · · · · · · · · · · · · · · · ·		<del> </del>	····		<u> </u>		···········	
8.8		its, or one		t associated with p					0						
9.0	<u> </u>								000	0001.01			<del></del>		
8.9	Production ratio o	<del></del>		ıction activities for t	hic ob	omical durin	a the ron	orting v		<del></del>		<del></del>			
8.10	enter "NA" in Sec				1112 (11	erncei dain	g the rep	orung y	eal fill	iot,					
	Source Reduction [enter continue of the contin		ities		M	ethods to Ide	entify Act	ivity (en	ter code	es)					
8.10.1	NA			a.	· •		b.	• •		·· · ·	c.				<del></del>
8.10.2				a.			b.				c.				
8.10.3				a.			b.				c.				
8.10.4				a.			b.				c.		1		
8.11	Is additional infor	mation on	source reduction	on, recycling, or pol	lution	control activ	ities					YE	s r	NO	
<b>-</b>	I WOODGE WITH THE	report : (	CHECK OHE DO	<b>y</b>								-1		Х	

EPA Form 9350-1 (Rev. 01/2001) - Previous editions are obsolete.

<sup>\*</sup> For Dioxin or Dioxin-like compounds, report in grams/y

<sup>\*\*\*</sup> Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping or disposing into the environment." Do not include any quantity treated onsite.

Approval Expires: 01/31/2003

#### rage

#### FORM R

**TOXIC CHEMICAL RELEASE** INVENTORY REPORTING FORM

**United States Environmental Protection Agency** 

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHE	RE TO SEND COM	PLETED	FORM		PCRA Rep O Box 334		g Center			OPRIATE S				Enter "X" here if the is a revision	is
					errifield, VA			RELEA	SE IN	/ENTORY			F	or EPA use only	
Imp	ortant: See ii	nstruc	tions	to dete	ermine	wh	en "No	ot Ap	olical	ole (NA)	" boxe	s sh	oulc	be checked.	
			P	ART I.	FACI	LIT	Y IDE	VTIF	CAT	ION IN	FORM	ATIO	ON		
SEC	TION 1. REPO	ORTING	YE/	AR 2001					The Library		···				
SEC	TION 2. TRAD	E SEC	RET	INFORM	MATION	i									
2.1	Are you claiming the Yes (Answer		n 2.2;	Г	X No (	Do no	secret? ot answer 2 Section 3)		2.2	Is this co	py only if "YE	S" in 2	Sanit	ized Uı	nsanitized
SEC	TION 3. CERT	(IFICA)	TION	(Impor	tant: R	eac	l and si	gn af	er co	mpletin	g all for	m se	ctio	ns.)	
inform using	by certify that I have nation is true and con data available to the	mplete an	d that t	the amount s report.	s and valu	es in	this repor		-	-	asonable e	estimat			<b></b>
	and official title of o	wner/ope	rator o				<del>*                                    </del>			· • · · · · · · · · · · · · · · · · · ·	Signatur	<del>2</del> :			Date Sig
ELLEN	HEATH		وفجيسوسان	GE	ENERAL MAN	VAGE	R				Cu	u	V	leath	11/01/200
SEC	TION 4. FACI	LITY ID	ENT	IFICATION	ИC						-			· · · · · · · · · · · · · · · · · · ·	
4.1									<u>.</u>	Number	21224BLT				·
	y or Establishment Na							Facility	or Estal	blishment Na	ame or Mail	ing Ado	dress(if	different from street a	idress)
BALTIN	MORE QUALITY ASSURA	NCE						NA		·, · · · · · · · · · · · · · · · · · ·					
Street 4200 B	STON ST.							Mailing	Address	s					
	ounty/State/Zip Code	1						City/St	ate/Zip C	inde	<u> </u>				Country (No
BALTIN	<del> , </del>	BALTI	IMORE (	СПҮ		MD	21224-	O.J.O.			!		-		
4.2	This report contain						1 Y 1	n entire			rt of a	ا ؞		A Federal	GOO
	(Important : check	k a or b; c	heck c	or d if appl	licable)	. a.		<b>acility</b>	b. [	fac	ility	C.	I	L	
4.3	Technical Contact	Name		DAVID H	OWE								h	phone Number (include 423-2003	area code)
				<del></del>	····		·····	<del></del>	<del></del>				+`	ohone Number (include	area code
4.4	Public Contact Na	me		ELLEN H	EATH								<del></del>	327-0916	3
4.5	SIC Code (s) (4 di	igits)			nary	$\Box$		······································	Γ	<del> </del>	Τ_		1 -,,-		_
		<u> </u>		1	099 Minutes	- '	b. 		C.	<del></del>	d			e.	f.
4.6	Latitude		grees 39		Minutes 17	+	Secon 15		L	ongitude		egrees 076		Minutes 33	Secon 24
4.7	Dun & Bradstreet	L	4.8		tification N		er	49		NPDES P		4.10		derground Injection	Well Code
a. N	Number(s) (9 digit	(S)	a.	(RCRA I.L	D. No.) (12	cna	racters)	a. N		r(s) (9 chai	acters)	<u> </u>	NA	C) I.D. Number(s) (	2 aigits)
b.			b.					b.				b.			
SEC	TION 5. PARE	NT CO	MPA	NY INFO	ORMAT	ION									
5.1	Name of Parent C	ompany		NA		C	OSMED	GROUP	•						
5.2	Parent Company's	Dun & B	radstre	et Number		N/	X	jT						· · · · · · · · · · · · · · · · · · ·	
	<del></del>							=		<del></del>					

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name
ETHYLENE GLYCOL

SEC	TION 1. TOXIC CHEMICAI	LIDENTIT	Υ	(Important:	DO NOT comple	ete this sec	tion if you com	pleted Sect	tion 2 below.)			
1.1	CAS Number (Important: Enter only	one number	exac	tly as it appears on t	he Section 313 lis	st. Enter cate	egory code if rep	orting a chen	nical category.)			
	107211 Toxic Chemical or Chemical Categor	ny Name (Im	nortar	nt: Enter only one na	me exactly as it a	nnears on th	ne Section 313 li	et )				
1.2	ETHYLENE GLYCOL	ny reame (iii	portai	nt. Lines only one na	ine exactly as it a	ppears on a	ic occion on a	J.,				
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive.)											
1.3	NA NA											
	1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.  (If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)  1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 1											
NA	XI I					<u> </u>						
SEC	TION 2. MIXTURE COMPO	NENT ID	ENT	ITY (Important:	DO NOT comple	ete this sec	tion if you con	pleted Sect	ion 1 above.)			
	Generic Chemical Name Provided	by Supplier (l	mpor	tant: Maximum of 70	characters, inclu	iding numbe	rs, letters, space	es, and punc	tuation.)			
2.1	NA				<del></del>							
	TION 2 ACTIVITIES AND	HEES OF	TUI	E TOYIC CUEN	NCAL AT TU	E EACU	ITV		·			
SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY (Important: Check all that apply.)												
3.1	3.1 Manufacture the toxic chemical: 3.2 Process the toxic chemical: 3.3 Otherwise use the toxic chemical:											
a. X Produce b. Import												
	If produce or import:		a.	As a reactar		a. [	<del></del>	mical proces	•			
C.			b.	<b>≓</b>	ation component	b.	==	ufacturing a	id			
d.			C.									
e.	<u> </u>		d.	Repackaging	•							
f.	As an impurity		е.	As an impurit				· · · · · · · · · · · · · · · · · · ·				
SEC	TION 4. MAXIMUM AMOU	NT OF TH	E T	OXIC CHEMIC	AL ONSITE A	AT ANY T	IME DURIN	G THE C	ALENDAR YE			
4.1	<u> </u>	<del></del>		instruction pac	<del>- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1</del>							
SEC	TION 5. QUANTITY OF TH	IE TOXIC	CHI	EMICAL ENTE	RING EACH I	ENVIRON	IMENTAL M	EDIUM O	NSITE			
				A. Total Release (Enter range code		<b>B. Basis</b> (enter	of Estimate code)	C. % From	Stormwater			
5.1	Fugitive or non-point air emissions	NA X		NA								
5.2	Stack or point air emissions	NA x		NA								
5.3	Discharges to receiving streams or water bodies (enter one name per	box)										
	Stream or Water Body Na	me										
5.3.1	NA											
5.3.2			_									
5.3.3												
If addit	ional pages of Part II, Section 5.3	are attached	d, ind	licate the total num	ber of pages in	this box	1					

TRI Facility ID Number
21224BLTMR4200B

Toxic Chemical, Category or Generic Name
ETHYLENE GLYCOL

and indicate the Part II, Section 5.3 page number in this box.

(example: 1,2,3, etc.)

TRI Facility ID Number
21224BLTMR4200B
Toyic Chemical Category or Generic Name

ETHYLENE GLYCOL

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE(Continue													
			NA	A. Tota	i Release	(pounds/y	• •	-	B. Basis of (enter c		te		,
5.4.1	Underground Injection to Class I Wells	onsite	х	NA									
5.4.2	Underground Injection to Class II-V Wells	onsite	х	NA									
5.5	Disposal to land onsite												
5.5.1A	RCRA Subtitle C land	fills	Х	NA		- 13					<u>, , , , , , , , , , , , , , , , , , , </u>		
5.5.1B	Other landfills		Х	NA	NA								
5.5.2	Land treatment/applica	ation	х	NA	·			,					
5.5.3	Surface Impoundment		Х	NA									
5.5.4	Other disposal		Х	NA									
SECTI	ON 6. TRANSFER	S OF THE	TO	XIC CH	EMICAL	IN WAS	TES T	O OFF-	SITE LOC	OITA	IS		
6.1 DIS	SCHARGES TO PL	JBLICLY (	NWC	ED TR	EATME	NT WOR	KS (PC	TWs)					
6.1.A T	otal Quantity Trans	ferred to P	OTW	s and B	asis of E	stimate							
6.1.A.1	. Total Transfers (po					6.1.A		of Esti	mate				
	(enter range code**	or estimate	*)				(enter	code)		<u> </u>			
	NA									·			
6.1.B.1	POTW Nam	NA											
POTW A	Address												
City					State		County					Zip	-
6.1.B.2	POTW Nam	10						·					
POTW A	Address												·
City					State		County		•	•		Zip	
If addition	onal pages of Part II, Se	ection 6.1 are	e attac	ched, ind	icate the t	otal numbe	er of page	es					
in this b	ox 1 and indicat	te the Part II,	Secti	on 6.1 pa	ige numbe	r in this b	ох [	1 (e	xample: 1,2	,3, etc.)			
SECTI	ON 6.2 TRANSFE	RS TO OT	HER	OFF-S	SITE LO	CATION	S						
6.2. <u>1</u>	Off-Site EPA Identi	ification Nu	mber	(RCRA	ID No.)		NA					_	
Off-Site	Location Name A	MERICAN C	HEMI	CAL EXC	HANGE								
Off-Site	Address 159 N. M	ARENGO AV	/E				SUITE	103	-				
City P	PASADENA		State	CA C	County L	OS ANGEL	ES			Zip 91	101-		ountry lon-US)
										1		$\overline{}$	

# EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Faci	lity ID Number
21224BL	.TMR4200B
Toxic Ch	emical, Category or Generic Name
ETHYLENE	GLYCOL

Is location under control of reporting facility or parent company?

Yes

X No

#### PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number									
21224BLTMR4200B									
Toxic Chemical, Category or Generic Name									
ETHYLENE GLYCOL									

A. Total Trans			ER OFF-SI	TE LOCA	TIONS (Continue	<del>,</del>					
(enter range	e code** or estimate)	r*) 	B. Basis of (enter co			C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)					
1. 68826			1. C			1. M93					
2. NA			2.			2.					
3.			3.			3.					
4.			4.			4.					
6.2. <u>2</u> Of	f-Site EPA Identific	cation Nun	nber (RCRA II	O No.)							
Off-Site location	n Name										
Off-Site Addres	ss										
City		s	State Co.	unty			Zip	Country (Non-US)			
Is location u	inder control of i	reporting f	facility or par	ent compa	any?	Y	'es	No			
A. Total T	ransfers (pounds/ range code** or estim	•		Basis of E				atment/Disposal/ Recovery (enter cod			
1.			1.	···	1	1.	<del></del>	J			
2.			2.			2.					
3.			3.			3.	3.				
4.			4.			4.					
SECTION 7	A. ON-SITE W	ASTE TR	EATMENT I	METHODS	AND EFFICIENCY	7					
X Not	Annlicable (NA) -		no on-site waste		applied to any or chemical category.						
. General Waste Stream (enter code)	1	Treatment M 3-character c	Method(s) Seque code(s)]	nce	c. Range of Influen Concentration	Effic	ste Treatment ciency mate	e. Based on Operating Data ?			
7A.1a	7A. 1b	1	2		7A.1c	7.	A. 1d	7A. 1e			
NA	3 6	4 7	5 8				%	Yes No			
7A.2a	7A. 2b	1	2		7A.2c	7/	A. 2đ	7A. 2e			
		4	5					Yes No			
	3 6	7	8	<del></del>	11		%	Yes No			
7A.3a					7A.3c	7,	% A. 3d	7A.3e			
	6	7	8		7A.3c	7/	A. 3d				
	6 7A. 3b	7	8 2		7A.3c	7/		7A.3e			
	6 7A.3b 3	7 1 4	8 2 5		7A.3c		A. 3d	7A.3e			
7A.3a	6 7A.3b 3 6 7A.4b 3	7 1 4 7 1 4	8 2 5 8 2 5				A. 3d %	7A.3e Yes No			
7A.3a 7A.4a	6 7A.3b 3 6 7A.4b 3 6	7 1 4 7 1 4 7	8 2 5 8 2 5 8		7A.4c	7/	% % A. 4d %	7A.3e Yes No 7A.4e Yes No			
7A.3a	6 7A.3b 3 6 7A.4b 3 6 7A.5b	7 1 4 7 1 4	8 2 5 8 2 5			7/	A. 3d % A. 4d % A. 5d	7A.3e Yes No 7A.4e			
7A.3a 7A.4a 7A.5a	6	7 1 4 7 1 4 7	8 2 5 8 2 5 8 2 5 8		7A.4c	7.	% % A. 4d %	7A.3e Yes No 7A.4e Yes No 7A.6e			

# EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

	TRI Facility ID Number									
	21224BLTMR4200B									
4	Toxic Chemical, Category or Generic Name									

		ETHY	ETHYLENE GLYCOL									
SECT	TON 7B. ON-SITE ENER	RGY REC	OVERY PRO	CES	SES						. , ,	
X	Not Addicable (NA) -		no on-site energy ning the toxic cher		,	•						
E	nergy Recovery Methods [enter 3	-character c	ode(s)]		F						-	
1 NA	2	·····		3				4				
SECT	SECTION 7C. ON-SITE RECYCLING PROCESSES											
х	Not Applicable (NA) - Check strea		on-site recycling is g the toxic chemic		•							
Recycling Methods [enter 3-character code(s)]												
1. N	A 2.		3.			]	4.				5.	
6.	7.		8.				9.				10.	
SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES												
Column A Column B Column C										Column D		
		1	Prior Year (pounds/year*)	Current I	Reporting nds/year*		Following Year (pounds/year*)			Second Following Year (pounds/year*)		
8.1	Quantity released ***		(poundaryour)	(hou	<del></del>	<u>′</u> NA	<del>  `</del>	poundaryour	NA NA		NA	
8.2	Quantity used for energy recove onsite	ery	NA			1	NA			NA		NA
8.3	Quantity used for energy recover offsite	ry	NA		NA		NA .		NA			NA
8.4	Quantity recycled onsite	· · · · · · · · · · · · · · · · · · ·		NA	NA			NA NA				NA
8.5	Quantity recycled offsite		1052	294		68826			68826			68826
8.6	Quantity treated onsite			NA		P	<b>√</b> A			NA		NA
8.7	Quantity treated offsite			NA		1	NA.			NA		NA
8.8	Quantity released to the environs catastrophic events, or one-time processes (pounds/year)	ment as a re events not a	sult of remedial ac associated with pr	ctions, oducti	ion			0				
8.9	Production ratio or activity index							000	0000.74			
8.10	Did your facility engage in any se enter "NA" in Section 8.10.1 and	ource reduct d answer Sec	ion activities for th	nis cho	emical durin	g the rep	orting y	ear? if	not,			
	Source Reduction Activities [enter code(s)]			Me	ethods to Ide	entify Act	ivity (en	ter cod	es)			
8.10.1	NA	a.				b.				C.		
8.10.2		a.				b.		····		C.	,,	
8.10.3		a.				b.				c.		
8.10.4		a.				b.	<del> </del>			c.		
8.11	Is additional information on sour included with this report? (Che		, recycling, or poll	ution (	control activ	ties					YE	s NO

EPA Form 9350-1 (Rev. 01/2001) - Previous editions are obsolete.

<sup>\*</sup> For Dioxin or Dioxin-like compounds, report in grams/ye

<sup>\*\*\*</sup> Report releases pursuant to EPCRA Section 329(8) including "any spilling, leakir pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumpir or disposing into the environment." Do not include any quantity treated onsite.



#### FORM R

**TOXIC CHEMICAL RELEASE** INVENTORY REPORTING FORM

**United States Environmental Protection** Agency

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHE	P.C	P.O Box 3348 Merrifield, VA 22116-3348				APPROPRIATE STATE OFFICE     (See instructions in Appendix F)				F	Enter "X" here if this is a revision  For EPA use only							
			<u> </u>		AT	TN: TOX	IC C	CHEMICAL	RELE	EAS	EINV	ENTOF	RY					
Imp	mportant: See instructions to determine when "Not Applicable (NA)" boxes should be checked.																	
			Р	AF	RT I.	FACI	LI	TY IDE	NTII	FIC	ATI	ON I	NF	ORM	ATIO	NC		
SEC	TION 1. REPO	ORTING	YEA	\R	2001													
SEC	TION 2. TRAD	E SEC	RET	INF	ORM	ATION	ı											
Are you claiming the toxic chemical identified on page 2 trade secret?  Yes (Answer question 2.2; Attach substantiation forms)  Are you claiming the toxic chemical identified on page 2 trade secret?  Is this copy  Sanitized  Unsanitized  (Answer only if "YES" in 2.1)																		
SEC	TION 3. CERT	IFICAT	TION	(lr	nport	ant: R	lea	d and s	ign a	ıfte	r con	nplet	ing	all for	m se	ctio	ns.)	
inform using	by certify that I have nation is true and cond data available to the	mplete an	d that t	he a s rep	mounts ort.	and valu	ies i	n this repo		-		_						
Name and official title of owner/operator or senior management official:										٤	Signature	e: 		,	Date Sig			
ELLEN	HEATH				GEI	NERAL MAI	NAGE	ER						Cle	la "	S	tack	11/01/200
SEC	TION 4. FACI	LITY ID	ENTI	FIC	ATIO	N												
4.1	TRI Facility ID Number 21224BLTMR4200B																	
Facility	y or Establishment Na	me							Facil	ity or	r Establ	ishmen	Nam	e or Maili	ng Add	lress(if	different from street a	ddress)
BALTIN	ORE QUALITY ASSURA	NCE							NA									
Street 4200 B	OSTON ST.								Mailir	ng A	ddress							
City/Co	ounty/State/Zip Code	BALTI	MORE C	ΉΥ			MD	21224-	City/s	State	Zip Co	de				_		Country (No
4.2	This report contain				if applic	cable)	a.	1 Y I	An entifacility	ire	ь. [		Part of		c.		A Federal facility d.	GOO
4.3	Technical Contact	Name		DA	AVID HO	WF										Telep	hone Number (includ	e area code)
4.0																<del> `</del>	423-2003	
4.4	Public Contact Na	me		EL	LEN HE	ATH										<del></del>	ohone Number (includ 327-0916	e area code)
					Prim	arv	Т			T				1		(410)	327-0916	
4.5	SIC Code (s) (4 di	igits) 		a.	. 20	99		b.			c.			d.			e.	f.
4.6	Latitude	-	grees		N	finutes	$\Box$	Seco		$\Box$	Loi	ngitude			egrees		Minutes	Secon
		3	39 T			17		15	; <del> </del>	1		<u> </u>		<u> </u>	076	Т.,.	33	24
4.7	Dun & Bradstreet Number(s) (9 digit	s)	4.8	(RC		Fication N . No.) (12			4.9	Nı		IPDES (s) (9 c			4.10	(UI	derground Injection C) I.D. Number(s) (	
<u>a. N</u> b.	<u> </u>		a. 1 b.	NA_					a. b.	NA					a. b.	NA		
SEC	TION 5. PARE	NT CO		NY	INFO	RMAT	101	V			-				<u> </u>			
5.1	Name of Parent C			NA			_	COSMED	GROL	JP					-			
5.2	Parent Company's	Dun & B	radstre				N	<b>A</b> [х										
																	· · · · · · · · · · · · · · · · · · ·	····

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name
ETHYLENE OXIDE

SEC	FION 1. TOXIC CHEMICAL	LIDENT	ITY	(imnori	ant: DO NOT	comple	te this section if you co	empleted Section 2 below.)					
	CAS Number (Important: Enter only	<del>-</del>				···	····						
1.1	75218	one numb	er exac	ony as it appears	on the Section	1313 1151	. Enter category code in its	eporting a criemical category.)					
	Toxic Chemical or Chemical Categor	ory Name (	Importa	ant: Enter only or	ne name exact	y as it ap	pears on the Section 313	list.)					
1.2	ETHYLENE OXIDE												
1.3	Generic Chemical Name (Important	: Complete	only if	Part 1, Section	2.1 is checked	"yes". C	Generic Name must be st	ructurally descriptive.)					
	NA Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.												
	(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should												
	be reported in percentages and the	_		-									
NA D	1 2 3 4	5	<u>6</u>	7	8 9	10	11 12 13	14 15 16 1					
	FION 2. MIXTURE COMPO	NENT	DEN.	TITY (Impact			to this section if you as	emplated Section 4 above \					
SEC													
2.1	Generic Chemical Name Provided	by Supplie	r (Impo	rtant: Maximum	of /U characte	rs, includ	ling numbers, letters, spa	ces, and punctuation.)					
	NA .	•						<u> </u>					
SECT	FION 3. ACTIVITIES AND (Important: Check all t			IE TOXIC CI	HEMICAL A	AT THE	FACILITY						
3.1	3.1 Manufacture the toxic chemical: 3.2 Process the toxic chemical: 3.3 Otherwise use the toxic chemical:												
a. Produce b. Import													
	If produce or import:  a. As a reactant  a. As a chemical processing aid												
c.	For on-site use/processing		b.	As a fo	rmulation com	ponent	b. As a m	anufacturing aid					
d.	For sale/distribution		C.	As an a	rticle compone	nt	c. X Ancillar	y or other use					
e.	As a byproduct		d.	Repack	aging								
f.	As an impurity		e.	As an in	npurity								
SEC	FION 4. MAXIMUM AMOU	NT OF T	THE 1	TOXIC CHE	MICAL ON	SITE A	T ANY TIME DURI	NG THE CALENDAR YEA					
4.1	03 (Enter two-d	ligit code	from	ninstruction	package.)								
SEC	FION 5. QUANTITY OF TH	IE TOXI	C CH	IEMICAL EN	ITERING E	ACH E	NVIRONMENTAL	MEDIUM ONSITE					
				A. Total Relea	se (pounds/ code or estim		B. Basis of Estimate (enter code)	C. % From Stormwater					
5.1	Fugitive or non-point air emissions	NA [	х	NA									
5.2	Stack or point air emissions	NA		245			С						
5.3	Discharges to receiving streams o water bodies (enter one name per	box)		No.									
	Stream or Water Body Na	me											
5.3.1	NA												
5.3.2													
5.3.3													
If addit	ional pages of Part II. Section 5.3	are attacl	ned. in	dicate the total	number of p	ages in t	his box 1						

\* For Dioxin or Dioxin-like compounds, report in grams

\*\* Range Codes: A= 1 - 10 pounds; B= 11- 499 pounds; C= 500 - 999 por

TRI Facility ID Number
21224BLTMR4200B
Toxic Chemical, Category or Generic Name
ETHYLENE OXIDE

and indicate the Part II, Section 5.3 page number in this box.

(example: 1,2,3, etc.)

TRI Facility ID Number
21224BLTMR4200B

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

Toxic Chemical, Category or Generic Name

ETHYLENE OXIDE

SECTIO	ON 5. QUAN	SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE(Continue										ITE(Co	ntinue			
				NA	А. Т	otal Re	lease		year*) (ent estimate)		B. Basis o					
5.4.1	Underground to Class I We		nsite	х	NA	\										
5.4.2	Underground to Class II-V		nsite	х	NA	١			·						•	
5.5	Disposal to la	nd onsite														
5.5.1A	RCRA Subtit	e C landfill	s	X	NA	\ 										
5.5.1B	Other landfills	;		Х	NA	١										
5.5.2	Land treatment	nt/application	on	X	NA	١										
5.5.3	Surface Impo	undment		х	NA	١			-							
5.5.4	Other dispose	al		х	NA	١								• •		
SECTION	ON 6. TRAN	ISFERS	OF THE	E TO	(IC C	CHEM	ICAL	IN WA	STES T	O OFF-	SITE LO	CAT	IONS			
6.1 DIS	CHARGES	TO PU	BLICLY	OWN	ED 1	ΓREA <sup>-</sup>	TMEN	IT WOF	KS (PC	TWs)						
6.1.A To	otal Quantity	/ Transfe	rred to P	OTW	s and	d Basis	s of E	stimate	`							
	Total Trans		-	•				6.1.4		of Esti	mate		·			
<del></del>	(enter range	code** o	r estimate	e) ———					(enter	code)				<del>,</del>		
	NA Inc	OTW Name			· · ·											
6.1.B.1		JI W Name	NA													
POTW A	Address															
City		•	•				State		County				,	Zi	р -	
6.1.B.2	PC	OTW Name								.d				<del></del>	<del>,  </del>	
POTW A	ddress							<del>.</del>					, ,·			-
City							State		County	Ī				Zi	р	
If additio	nal pages of P	art II, Sec	tion 6.1 ar	e attac	hed, i	indicate	the to	tal numb	er of page	es				<b>!</b>	<u> </u>	
in this bo	ox 1 and	d indicate	the Part II,	, Sectio	on 6.1	page n	numbei	in this b	ох [	1 (e	xample: 1,2	,3, et	c.)			
SECTION	ON 6.2 TRA	NSFER	S TO 01	THER	OFF	F-SITE	E LOC	ATION	S	_						
6.2. <u>1</u>	Off-Site EP	A Identific	cation Nu	mber	(RCR	RA ID N	10.)		NA							
Off-Site L	ocation Name	NA									•					
Off-Site A	Address										•	•				
City				State		Count	у				<del></del>	Zip			Country	
	<del></del>			L	L	<u> </u>						<u> </u>	l		(Non-US)	

\* For Dioxin or Dioxin-like compounds, report in grams/

<sup>\*\*</sup> Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pour

# EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED) Is location under control of reporting facility or parent company? TRI Facility ID Number 21224BLTMR4200B Toxic Chemical, Category or Generic Name ETHYLENE OXIDE

#### PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID	Number
21224BLTMR	4200B
Toxic Chemica	I, Category or Generic Name
ETHYLENE OXIDE	

SECTION 6.	2 TRANSFERS	TO OTH	IER OFF	-SITE	LOCA	ГІС	NS (Continued	i)														
A. Total Transfe (enter range	B. Basis of Estimate (enter code)						C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)															
1.	1.					1.																
2.		-	2.					2.														
3.			3.	-				3.														
4.			4.					4.														
6.2. <u>2</u> Off-	Site EPA Identific	cation Num	nber (RCR	A ID N	0.)							-										
Off-Site location	Name							<del></del>														
Off-Site Address	5							,														
City		s	state	County					Zip			untry n-US)										
Is location un	nder control of a	reporting f	facility or	paren	t comp	any	<b>/?</b>		Yes			No										
A. Total Tra (enter ra	ansfers (pounds/	- ,			asis of E		nate		ype of Waste Tr Recycling/Energ													
1.			1.					1.														
2.			2.					2.														
3.			3.					3.														
4.			4.					4.														
SECTION 7/	A. ON-SITE W	ASTE TR	EATMEN	IT ME	THODS	S A	ND EFFICIENCY	,														
	nnlicable (NA) -	heck here if	no on-site v	vaste tre	atment is	арр						•										
a. General Waste Stream (enter code)	b. Waste	Treatment M 3-character c	lethod(s) Se	_			c. Range of Influent Concentration		Vaste Treatment Efficiency Estimate	e. Base Oper		Data ?										
7A.1a	7A. 1b	1	A03	2	A03	Τ	7A. 1c		7A. 1d	<u> </u>	7A.	1e										
A	3 A03	4 7	NA	5 8		1	1		99.5 % Yes X			No										
7A.2a	7A. 2b	1	+	2		╈	7A.2c		7A. 2d	7A.2e												
77124	3 6	4 7		5 8		1			%	Y	es	No										
7A.3a	7A.3b	1		2		╁	7A.3c		7A. 3d	7A.3e		 3e										
	3	4		5		1				Y	25	No										
	6	7		8		1			%													
7A.4a	7A.4b	1		2		T	7A.4c	1	7A. 4d		7A.	4e										
	3	4		5		1				Y	÷s	No										
	6	7		8		1			%													
7A.5a	7A.5b	1		2		T	7A. 5c		7A. 5d		7A.	5e										
	3	4		5					۸,	Y	es	No										
	6	7		8					%													
	•		-				umber of pages in thi		1													
and indicate the	Part II, Section 6.2	7A page nu	mber in th	is box :		1_	(example: 1,2,3, etc)	1				and indicate the Part II, Section 6.2/7A page number in this box : 1 (example: 1,2,3, etc)										

<sup>\*\*</sup> Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pou

#### TRI Facility ID Number **EPA FORM R** PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

,	21224BLTMR4200B								
	Toxic Chemical, Category or Generic Name								

Toxic Chemical,	Category or	Generic Name

		ETHY	ETHYLENE OXIDE								
SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES											
X Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.											
Energy Recovery Methods [enter 3-character code(s)]											
1 NA	NA 2 3 4										
SECTION 7C. ON-SITE RECYCLING PROCESSES											
Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.											
R	ecycling Methods [enter 3-character code(s	5)]									
1. N	A 2.	3.			4.				5.		
6.	7.	8.			9.				10.		
SECT	ION 8. SOURCE REDUCTION	AND RECYCLING	ACTIVIT	IES							
		Column A	1	olumn B			Column C		Column D		
		Prior Year (pounds/year*)	1	Current Reporting Year (pounds/year*)			ollowing Year* oounds/year*		Second Following Year (pounds/year*)		
8.1	Quantity released ***	376	(po	245				245	245		
8.2	Quantity used for energy recovery	NA		NA		NA NA		NA	NA		
	onsite										
8.3	Quantity used for energy recovery offsite	NA NA		NA		NA NA		NA	NA		
8.4	Quantity recycled onsite	NA		N	IA .			NA	NA		
8.5	Quantity recycled offsite	NA		NA				NA	NA		
8.6	Quantity treated onsite	75100	49090			49090			49090		
8.7	Quantity treated offsite	NA NA	<u> </u>	N	IA	NA NA					
8.8	Quantity released to the environment as a catastrophic events, or one-time events no processes (pounds/year)					0					
8.9	Production ratio or activity index 0000000.74										
	Did your facility engage in any source reduenter "NA" in Section 8.10.1 and answer 8		nemical duri	ng the rep	orting ye	ear? If i	not,				
8.10	Source Reduction Activities [enter code(s)]	. M	lethods to Id	entify Acti	vity (ent	er code	es)				
8.10.1	NA <sub>.</sub>	a.		b.				c.			
8.10.2		a. ·				b.					
8.10.3		а.		b.				c.			
8.10.4					c.						
8.11	Is additional information on source reduction, recycling, or pollution control activities  YES  NO  X										

EPA Form 9350-1 (Rev. 01/2001) - Previous editions are obsolete.

<sup>\*</sup> For Dioxin or Dioxin-like compounds, report in grams/ye

<sup>\*\*\*</sup> Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping or disposing into the environment." Do not include any quantity treated onsite.